

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As the below named inventor, I hereby declare that:

My residence, post office address and citizenship is as stated below next to my name;

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**NOVEL IMMUNOGENIC COMPOSITIONS FOR THE PREVENTION AND TREATMENT OF
MENINGOCOCCAL DISEASE**

the specification of which: ☐ is attached hereto.

☒ was filed on:

as United States Application No.:

or PCT International Application No.: PCT/2004/011901

and was amended on: October 17, 2005 (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. § 1.56.

Prior Foreign Application(s)

I hereby claim foreign priority benefits under 35 U.S.C. §§ 119(a)-(d) or (f), or § 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below by checking the box, any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed:

| Application Number | Country | Date of Filing (day, month, year) | Date of Issue (day, month, year) | Priority Claimed | |
|--------------------|---------|--------------------------------------|-------------------------------------|---|-----------------------------|
| PCT/US2004/011901 | US | 16 April 2004 | | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| | | | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | | | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

Prior Provisional Application(s)

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below:

| Application Number | Date of Filing (day, month, year) |
|---------------------------|--|
| 60/463,161 | 16 April 2003 |
| | |
| | |

Prior United States Application(s)

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose material information as defined in 37 C.F.R. § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

| Application Number | Date of Filing (day, month, year) | Status - Patented, Pending, Abandoned |
|---------------------------|--|--|
| | | |
| | | |
| | | |

And I hereby appoint, both jointly and severally, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith the Hunton & Williams LLP attorneys and agents associated with **CUSTOMER NUMBER 21967**.

All correspondence and telephone communications should be addressed to:

| |
|---|
| <p>CUSTOMER NUMBER 21967</p> |
|---|

corresponding to the law firm of Hunton & Williams LLP; Intellectual Property Department; 1900 K Street, N.W.; Suite 1200; Washington, DC 20006-1109; telephone number (202) 955-1500; facsimile number (202) 778-2201.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made

are punishable by fine and imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Signature _____ Date _____
 Given Name (first and middle (if any)) **Gary W.** Family Name or Surname **ZLOTNICK**
 Citizenship: **US**
 Residence: **New Windsor, NY**
 Mailing Address: **1033 Rolling Ridge, New Windsor, NY 12553**

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Signature _____ Date _____
 Given Name (first and middle (if any)) **Leah Diane** Family Name or Surname **FLETCHER**
 Citizenship: **US**
 Residence: **Geneseo, NY**
 Mailing Address: **37 Second Street, Geneseo, NY 14454**

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Signature _____ Date _____
 Given Name (first and middle (if any)) **John Erwin** Family Name or Surname **FARLEY**
 Citizenship: **US**
 Residence: **Chapel Hill, NC 27516**
 Mailing Address: **101 Michaels Way, Chapel Hill, NC 27516**

NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Signature _____ Date _____
 Given Name (first and middle (if any)) **Liesel A.** Family Name or Surname **BERNFELD**
 Citizenship: **US**
 Residence: **Pittsford, NY**
 Mailing Address: **2519 Lehigh Station Road, Pittsford, NY 14534**

NAME OF FIFTH INVENTOR:

☐

A petition has been filed for this unsigned inventor

Signature _____ Date _____
Given Name (first and middle (if any)) **Robert J.** Family Name or Surname **ZAGURSKY**
Citizenship: **US**
Residence: **Victor, NY**
Mailing Address: **569 Fox Hunt Drive, Victor, NY 14564**

NAME OF SIXTH INVENTOR:

☐

A petition has been filed for this unsigned inventor

Signature _____ Date _____
Given Name (first and middle (if any)) **Benjamin J.** Family Name or Surname **METCALF**
Citizenship: **US**
Residence: **Rochester, NY**
Mailing Address: **15 Rensselaer Drive, Rochester, NY 14618**